File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



COMMITTEE NAME (Must be same as on Statement of Organization)

RECEIVED JUN - 9 2009

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Jan Alderton for Supervisor	n Alderton for Supervisor		FORM DR-2	
(1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Car	ANDIDATE COMMITTEES ONLY:			
CANDIDATE COMMITTEES ONLY:				
Candidate Name	Political Party (if applicable)			
Jan Alderton	Republican			
Office Sought Supervisor	District (if Senate or House) N/A			
Late reports are subject to possible civil and criminal penalties.	Pursuant to Iowa Code sections 68B.32A(7)	and 68 <i>F</i>	\.401(3), the ca	ndidate, for a
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	IGNED
I AM FILING A	REPORT FOR (1) ELECTION /(2	NON-E	LECTION YE	AR.
(report date)	Indicate by #	1		
CHECK IF AMENDMENT TO REPORT DATED October	19, 2008	al Comm	nittees, enter Da	te of Election
	i	/4/2008		te of Election
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file	ed.)	ch Electi	ocal Committees on is held VISTA	, enter County in
STATEMENT OF CASH ON HAM	ND			
CASH ON HAND at the beginning of the reporting period. (7 committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	Fotal of all funds held by the e cash on hand at the end	\$	0.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sche	edule A) (*also see in-kind below)		562.28	
Schedule F: Loans Received total (Attach Schedul	le F)			
Schedule H: Total Sales of Campaign Property (Al				
(Schedule H applies to Candidates' Cor	nmittees Only)		· · · · · · · · · · · · · · · · · · ·	
	SUB-TOTAL	\$	562.28	
SUBTRACT TOTAL MONEY SPENT THIS PERIO		•		
Schedule B: Expenditures total (Attach Schedule B			455.68	
Schedule F: Loan Repayments total (Attach Sched				4
CASH ON HAND at the end of this reporting period (if final re	•		106.60	· · · · · · · · · · · · · · · · · · ·
	·	_		
**UNPAID BILLS (From Schedule D - Attach Schedule D)		•		
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch	·		116.50	
**OUTSTANDING LOANS (From Schedule F - Attach Sched	dule F)	\$		
CONSULTANT BREAKDOWN (Schedule G Attached?)			_YES <u>✓</u>	NO
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H - At	tach Schedule H)	\$		
STATE COMMITTEES: Submit a reconciled campaign acco	ount bank statement in January of each ye	ar.		

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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COMMITTEE NAME (Must be same as on Statement of Organization)	
Jan Alderton for Supervisor	

SCHEDULE			
A (Rev. 07/03)	MONETARY RECEIPTS		
	CK THIS BOX IF NDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/30/2008	ID# CK#	Jan Alderton 900 E 1st Storm Lake, IA 50588	self	\$278.79	
10/08/2008	ID# CK#	Mark Alderton/Rick Sharp 5329 E Glencove Mesa, AZ 85205	son	50.00	
10/08/2008	ID# CK#	Buena Vista County Rebpulican Women Storm Lake, IA 50588		28.30	
10/14/2008	ID# CK#	Jan Alderton 900 E 1st Storm Lake, IA 50588	self	205.19	
	ID# CK#				
,			SUB-TOTAL	\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

562.28

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

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COMMITTEE NAME	(IVIUSI DE	same as on	Statement	oi Oigailization)

Jan Alderton for Supervisor

DATE	CANDIDATE ID NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
EXPENDED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	(Disbursement) WAO MADE		
7/2/2008	ID# CK#	Jan Alderton, Candidate	Colorize T-shirts	\$ ^{50.83}
	ID#	Farm Bureau		
8/19/2008	CK#			45.00
	ID#	Silk Screen Inc	Yard signs	226.25
10/9/2008	СК#	Storm Lake, IA 50588		326.35
	ID#	Pilot Tribune	Advertising	
10/12/2008	ск#			33.50
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	<u> </u>	<u> </u>	SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 455.68

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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Page	-	of _	•	

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COMMITTEE NAME (Must be same as on Statement of Organization)	١
Jan Alderton for Supervisor	

SCHEDULE E	IN-KIND
(Rev. 06/97)	CONTRIBUTIONS
	K THIS BOX IF DING FORM

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
03/01/2008	Jan Alderton 900 E 1st Storm Lake, IA 50588	self	paid printing for bio sheets	\$ 10.70	
9/23/2008	Jan Alderton 900 E 1st Storm Lake, IA 50588	self	printing Bio Sheets	42.80	
9/30/2008	Willis Strawn 303 E Lakeshore Storm Lake, IA 50588	friend	Paid for sign stakes	63.00	
<u> </u>		<u> </u>	SUB-TOTAL	\$	
TOTAL (if last page of this				\$ 116.50	
			schedule)	ì	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

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